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PTO/SB/17 (12-04v2)
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Effective	Effective on 12/08/2004.					Complete if Known				
	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				nber	10/088,567				
FEE TRANSMITTAL				Filing Date		March 19, 200	2	_		
For F	First Named Inv	entor	Shizuo AKIRA							
FOI I	Examiner Name Michelle S. Horning									
Applicant claims small of	entity status.	See 37 CFR 1.2	7	Art Unit		1648				
TOTAL AMOUNT OF PAYM	MENT	(\$) \$18	0 -	Attorney Docket	No.	31671-178057				
METHOD OF PAYMENT	(check all	that apply)								
Check Credit C	ard	Money Order	Non	oe Other	(please					
X Deposit Account Depos	it Account Nun	nber: 22-0261 c	Deposit Acco	ount Name:		Venable LLF	·			
For the above-identit	fied deposi	t account, the D	irector is	hereby authorize	d to: (che	ck all that apply)				
X Charge fee(s)	indicated b	elow		Charge	e fee(s) ind	dicated below, ex	cept for	the filing fee		
X Charge any ad	iditional fee	(s) or underoav	ment of	X Credit	any overpa	avmente				
fee(s) under 3	7 CFR 1.16	and 1.17		A Cledit	any overpo					
FEE CALCULATION (AI	I the fees	below are d	ue upor	filing or may	be subje	ect to a surcha	arge.)			
1. BASIC FILING, SEARCH,	•									
	FILIN	NG FEES	SEA	RCH FEES	EXAMIN	NATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	⁻ 150	500	250	600	300				
Provisional	200	100	0	0	0	0				
							Small Entity			
Fee Description		,					Fee (\$)	Fee (\$)		
Each claim over 20 (inclu	•	•	1				50	25		
Each independent claim over 3 (including Reissues) 200 100						100				

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Plant	200	100	300	150	160	80		
Reissue	300	· 150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIN	FEES							Small Entity
Fee Description							<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over	20 (including Reis	sues)					50	25
Each independer	nt claim over 3 (in	cluding Reiss	sues)				200	100
Multiple depende	ent claims						360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid	d (\$)	<u>Mult</u>	iple Depend	dent Claims	<u>3</u>
20	=x	=			Fee	(\$)	Fee Paid (<u>\$)</u>
HP = highest number	of total claims paid for	if greater than 2	20.					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid	<u> </u>				
-3		=						
HP = highest number of 3. APPLICATION S	of total claims paid for	if greater than 3	3.					
	on and drawings	evceed 100 s	sheets of na	ner (excludi	na electronia	ally filed so	equence of	r computer
	r 37 CFR 1.52(e)							
	ction thereof. Se					man ontity)	101 000110	aditional oo
Total Sheets	Extra Sheets	Numbe	er of each addi	tional 50 or fra	action thereof	Fee (\$)	<u>Fee</u>	Paid (\$)
	100 =	/50	(ro	und up to a wh	nole number) x		=	
4. OTHER FEE(S)							Fees	Paid (\$)
Non-English S	Specification, \$13	30 fee (no sm	nall entity dis	count)				

SUBMITTED BY					
Signature	1 1. Hora	Registration No. (Attorney/Agent)	36,830	Telephone	(202) 344-4000
Name (Print/Type)	Ann S. Hobbs, Ph.D.			Date	March 30, 2007

Other (e.g., late filing surcharge): Information Disclosure Statement

836739



Docket No: 31671-178057

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Shizuo AKIRA et al.

Art Unit: 1648

Application No: 10/088,567

Examiner: M. Horning

Confirmation No: 3078

Filed: March 19, 2002

Atty. Docket No: 31671-178057

Customer No:

For: RECEPTOR PROTEIN SPECIFICALLY RECOGNIZING BACTERIAL DNA"

26694
PATENT TRADEMARK OFFICE

INFORMATION DISCLOSURE STATEMENT (IDS)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

This is a Information Disclosure Statement submitted under 37 C.F.R. § 1.97 within the time specified under 37 C.F.R. § 1.97(b).

Attached are copies of the references cited in the European Search Report dated April 28, 2005, and the documents cited therein in connection with the corresponding international application.

A Form PTO-SB/08 listing the documents are attached.

As all requirements of 37 C.F.R. § 1.97 and § 1.98, and all official guidelines pertaining to

Information Disclosure Statements have been complied with, it is respectfully requested that the

Examiner consider the cited publications and make them of received. 180.00 DA

180.00 DA

Application No.: 10/088,567 Docket No.: 31671-178057

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 22-0261, under Order No. 31671-178057.

Dated: March 30, 2007

Respectfully submitted,

Ann S. Hobbs

Registration No.: 36,830

By (1. 16 m

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PTO/SB/08a/b (07-05)
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Complete if Known Substitute for form 1449A/B/PTO Application Number 10/088,567 INFORMATION DISCLOSURE March 19, 2002 Filing Date STATEMENT BY APPLICANT Shizuo AKIRA et al. First Named Inventor Art Unit 1648 (Use as many sheets as necessary) Examiner Name M. Horning Sheet of 2 Attorney Docket Number 31671-178057 1

	U.S. PATENT DOCUMENTS							
Examiner	Cito	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where			
Initials*	Cite No.1	Number-Kind Code ² (if known)		Applicant of Cited Document	Relevant Passages or Relevant Figures Appear			
	AA							
	AB							
	AC							
	AD							
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	AG							
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		FOREIG	GN PATENT	DOCUMENTS		
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
	ВА	WO 02/022809	03/21/2002	WIPO		\vdash
	ВВ	WO 01/90151	11/29/2001	WIPO		П
	ВС	WO 01/55386	08/02/2001	WIPO		П
	BD	WO 01/81578	11/01/2001	WIPO		
	BE	WO 02/31111	04/18/2002	WIPO		
	BF		-			
	BG			·	, i	П
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 'Applicant's unique citation designation number (optional). 'See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 'Senter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 'For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 'Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. Applicant is to place a check mark here if English language Translation is attached.

Examiner	····	Date	
Signature		Considered	

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Sut	ostitute for form 1449A/B/PT			Complete if Known		
				Application Number	10/088,567	
l IN	NFORMATION	1 DI	SCLOSURE	Filing Date	March 19, 2002	
l s	TATEMENT E	3Y /	APPLICANT	First Named Inventor	Shizuo AKIRA et al.	
				Art Unit	1648	
	(Use as many sh	eets as	s necessary)	Examiner Name	M. Horning	
Sheet	2	of	2	Attorney Docket Number	31671-178057	

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	CA	GENBANK Accession No. AF 259262 Modification date 2/6/01: (cited in EP Search Report dated April 28, 2005)	
	CB	GENBANK Accession No. AF245704 last update: 04/15/2005	
	CC	GENBANK Accession No. AB 045180 - Modification date 02/10/2001	
	CD	GENBANK Accession No. AF 348140 - Modification date 08/02//2001	
	CE	GENBANK Accession No. AF 314224 - Modification date 09/24/2002	
	CF	GENBANK Accession No. AA 273731 (cited in EP Office Action 11/11/05)	
	CG		
	СН		
	CI		
	CJ		
	СК		
	CL		
	СМ		

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Signature	Considered	

^{&#}x27;Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached. 803759